

Supplemental materials for:

Plug I, van Dulmen S, Stommel W, olde Hartman TC, Das E. Physicians' and Patients' Interruptions in Clinical Practice: A Quantitative Analysis. *Ann Fam Med.* 2022;20:423-429.

## **Appendix 1. Matching and Covariates**

### *Matching*

We matched four gender dyads compositions (each consisting of 21 consultations) on patient age, physicians' assessment of the origin of the symptoms (medically explained (MES) or unexplained symptoms (MUS)), and consultation type (first or follow-up visit). An one-way ANOVA did not reveal statistically significant differences in patient age in the four gender dyads,  $F(3,80) = 0.195$ ,  $p = .900$ ,  $R^2 = 0.007$ . A Fisher's exact test revealed that the association between GP's assessment (MUS vs. MES) and gender dyad composition was not significant,  $p = .814$ ,  $V = 0.122$ . As for consult type, a chi-square analysis revealed that the association between consult type (first visit vs. follow-up visit) and gender dyad composition was not significant,  $\chi^2 = 2.15$ ,  $p = .541$ ,  $V = 0.162$ . Additionally, the results of Kruskal-Wallis test did not show a statistically-significant difference in consultation length in the four gender dyads,  $H(3) = 5.82$ ,  $p = .121$ . Likewise, the results of the one-way ANOVA did not show a statistically-significant difference in phases length in the four gender dyads,  $F(3,80) = 1.914$ ,  $p = .134$ ,  $R^2 = 0.067$ . All in all, we can conclude that the consultations in the four dyad compositions were successfully matched.

### *Covariates*

Multiple covariates were considered, i.e., the length of the total consultation, the length of the two included consultation phases together, physician's self-reported gender identity and expression, physician's age, patient's age, consult type (first vs. follow-up), and physician's assessment of symptoms (MUS vs. MES). Eventually, only patient's age significantly improved model fit ( $p = .006$ ), and was therefore added to the final model.

## Appendix 2. Examples of cooperative and intrusive interruptions

**Cooperative: Agreement**

|           |  |
|-----------|--|
| Patient   | it is the posture that I find / tremendously bothering / |
| Physician | / it is the posture /                                    |

**Cooperative: Assistance**

Patient           that thing they have done / eh /  
Physician                 / at / the surgeon eh

### *Cooperative: Clarification*

|           |  |
|-----------|--|
| Patient   | whether it has to do with balance that eh / that / |
| Physician | / how / long – how long does it take?              |

***Intrusive: Disagreement***

Patient            you thought it was a crack or an eh / sprain /  
Physician                 / no if it / if that, chances are there is not

***Intrusive: Floor-taking***

Patient        yeah well it is now / six weeks /  
Physician       / and that is / in general of course the time they say eh

***Intrusive: Topic-change***

Patient I already read that it / would /  
Physician / how long / did you need to wait?

### *Intrusive: Tangentialization*

|           |                             |
|-----------|-----------------------------|
| Patient   | because / eh /              |
| Physician | / yes / I heard that indeed |